

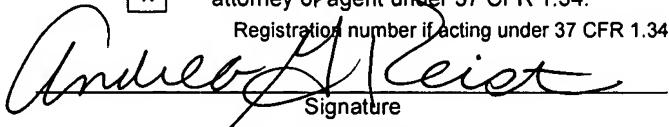


PTO/SB/22 (04-07)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) • 010786.0094-US00
Application Number 10/634,027-Conf. #5050		Filed August 4, 2003
For THREE DIMENSIONAL COORDINATES OF HPTPBETA		
Art Unit 1652		Examiner N. T. Nashed
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$120 Small Entity Fee \$60
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$450 Small Entity Fee \$225
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1020 Small Entity Fee \$510 \$ 1,020.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1590 Small Entity Fee \$795
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2160 Small Entity Fee \$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0740</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input type="checkbox"/> attorney or agent of record. Registration Number _____		
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>36,253</u>		
 <u>Andrea G. Reister</u> Signature		
<u>Andrea G. Reister</u> Typed or printed name		
<u>May 21, 2007</u> Date		
<u>(202) 662-5141</u> Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.	

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